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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	Adelson-1
First Named Inventor	Adelson, Richard
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**AN ONLINE-LIKE ACCOUNT PROCESSING SYSTEM AND METHOD FOR
ACCOUNT MANAGEMENT**

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/192,715	03/28/00	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number → *Place Customer Number Bar Code Label here*

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Arthur L. Plevy	24,277	Paul A. Schwarz	37,577
Edward J. Howard	42,670	Jane E. Alexander	36,014
Carl A. Giordano	41,780		

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number OR Correspondence address below

Name	Arthur L. Plevy				
Address	Duane, Morris & Heckscher, LLP				
Address	100 College Road West, Suite 100				
City	Princeton	State	NJ	ZIP	08540
Country	USA	Telephone	609-919-4402		Fax 609-919-4401

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle if any)			Family Name or Surname				
Richard			Adelson				
Inventor's Signature						Date	
Residence: City	Newington	State	CT	Country	USA	Citizenship	USA
Post Office Address	33 Harold Drive						
Post Office Address							
City	Newington	State	CT	ZIP	06111	Country	USA

Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>5</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Kathy				Barrett				
Inventor's Signature							Date	
Residence: City	Enfield	State	CT	Country	USA	Citizenship	USA	
Post Office Address	11 Bailey Road							
Post Office Address								
City	Enfield	State	CT	ZIP	06082	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Doug				Bendel				
Inventor's Signature							Date	
Residence: City	West Hartford	State	CT	Country	USA	Citizenship	USA	
Post Office Address	82 Timberwood Road							
Post Office Address								
City	West Hartford	State	CT	ZIP	06117	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Keven J.				Busque				
Inventor's Signature	<i>Kathy Busque</i>						Date	3/26/01
Residence: City	Manchester	State	CT	Country	USA	Citizenship	USA	
Post Office Address	50 Holl Street							
Post Office Address								
City	Manchester	State	CT	ZIP	06040	Country	USA	

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 5
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Daniel B.		Chaput					
Inventor's Signature							Date
Residence: City	Mansfield Ctr.	State	CT	Country	USA	Citizenship	USA
Post Office Address	56 River Road						
Post Office Address							
City	Mansfield Ctr.	State	CT	ZIP	06250	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Marie T.		Engel					
Inventor's Signature							Date
Residence: City	Ellington	State	CT	Country	USA	Citizenship	USA
Post Office Address	22 Ellsworth Lane						
Post Office Address							
City	Ellington	State	CT	ZIP	06029	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Marshall		Kaplan					
Inventor's Signature							Date
Residence: City	West Hartford	State	CT	Country	USA	Citizenship	USA
Post Office Address	44 Selden Hill Drive						
Post Office Address							
City	West Hartford	State	CT	ZIP	06107	Country	USA

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>5</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Beverly I.		Kirby					
Inventor's Signature							Date
Residence: City	Enfield	State	CT	Country	USA	Citizenship	USA
Post Office Address	6 Birchwood Road						
Post Office Address							
City	Enfield	State	CT	ZIP	06082	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
John		Lamb					
Inventor's Signature							Date
Residence: City	Newtown	State	CT	Country	USA	Citizenship	USA
Post Office Address	178 Brushy Hill Road						
Post Office Address							
City	Newtown	State	CT	ZIP	06470	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Nora		Medina					
Inventor's Signature							Date
Residence: City	Madison	State	WI	Country	USA	Citizenship	USA
Post Office Address	910 North Westfield Road						
Post Office Address							
City	Madison	State	WI	ZIP	53717	Country	USA

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 4 of 5

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Sandra J.		Meyerhofer						
Inventor's Signature							Date	
Residence: City	Berlin	State	CT	Country	USA	Citizenship	USA	
Post Office Address	110 Elton Road							
Post Office Address								
City	Berlin	State	CT	ZIP	06037	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Jeff		Ryan						
Inventor's Signature							Date	
Residence: City	W. Simsbury	State	CT	Country	USA	Citizenship	USA	
Post Office Address	131 Old Farms Road							
Post Office Address								
City	W. Simsbury	State	CT	ZIP	06092	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Jean A.		Sirica						
Inventor's Signature							Date	
Residence: City	Naugatuck	State	CT	Country	USA	Citizenship	USA	
Post Office Address	45 Heritage Drive							
Post Office Address								
City	Naugatuck	State	CT	ZIP	06770	Country	USA	

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 5 of 5**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Mark J.		Smith					
Inventor's Signature							Date
Residence: City	West Hartford	State	CT	Country	USA	Citizenship	USA
Post Office Address	140 Hyde Road						
Post Office Address							
City	West Hartford	State	CT	ZIP	06117	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
James		Tsukalas					
Inventor's Signature							Date
Residence: City	Hebron	State	CT	Country	USA	Citizenship	USA
Post Office Address	10 Hebron Landing						
Post Office Address							
City	Hebron	State	CT	ZIP	06248	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
M. Kathleen		Williams					
Inventor's Signature							Date
Residence: City	Barkhamsted	State	CT	Country	USA	Citizenship	USA
Post Office Address	78 No. Canton Road						
Post Office Address							
City	Barkhamsted	State	CT	ZIP	06059	Country	USA

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